

IV. REMARKS

Claims 1, 36 and 37 are amended. Claims 38-44 are new.

Please charge the amount of \$350.00 to deposit account no. 16-1350 for seven additional claims. The Commissioner is hereby authorized to charge payment for any fees associated with this communication or credit any over payment to Deposit Account No. 16-1350.

Respectfully submitted,



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(203) 259-1800
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7 April 2005

Date

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to (703) 872-9306 on the date indicated below.

Date: April 7, 2005

Signature: Meagan Bay
Person Making Deposit